

Amend the remaining claims as follows:

Sub 17  
15. (Thrice amended) In a method of treating infertility disorders by administering an LH-RH Antagonist and administering an exogenous gonadotropin for inducing follicle growth [by administration of exogenous gonadotropin], the improvement <sup>comprising</sup> of administering [an amount of] the LH-RH Antagonist within a controlled ovarian stimulation program either in a single or dual dose regimen of 1 to 10 mg or in a multiple dosage regimen of 0.1 to 0.5 mg per day [effective to suppress endogenous LH, while FSH secretion is maintained at a natural level and individual estrogen development is not affected].

Sub 37  
21. (Amended) A method of controlled ovarian stimulation in which Cetorelix is <sup>comprising admini.</sup> administered <sup>either</sup> either in a single or dual dose of 1 to 10 mg or in a multiple dosage regiment of 0.1 to 0.5 mg per day [applied] starting at cycle day 1 to 10 and ovulation can be induced between day 9 to 20 of the menstruation cycle.

#### REMARKS

With entry of this amendment, claims 15, 16, 18-24 and 26-37 are pending. Claims 15 and 21 have been amended. New claims 34-37 have been added to recite preferred dosage amounts of the invention, as disclosed in the application. No new matter has been added. Reconsideration is requested.

In the advisory action issued July 11, 2000, the Examiner indicated that